KBHI – RENEWAL LICENSURE CHECKLIST:

(last name)	(first name)		(mid. Initial)	VIII. KY State Police Ba	ckgrour	nd Check?	Yes	No
					IX. Out of state resident?	Yes	No		
l.	Payment include	d (NONREFUNDABLE)	Yes	No	X. Other state background o	checks?	Yes	No	N/A
II.	Photograph (2"x	2" passport) Yes	No						
III.	Applicant Personal Information a. Complete permanent mailing address? (P.O. Box will not be accepted) Yes No			ACTION BY THE KBI	41				
	b. Telephone N	umbers? Home, Work and/	or Cell		APPROVED FOR LICE	ENSE			
	Yes No				APPROVED CONTING	SENT			
	c. Date of Birth' Yes No				☐ DENIED LICENSE				
IV. (Copy of Home Ins	pection Report			1				
	Standard of Pract	ice	-						
	Signed Report Wi	th License #?			2				
V. P		d Housing v and Regulations			3.				
Standard of Practice Other Board Certified Education			Member Name		Initials		Date		
VI. (d. Documentative. Effective date f. Expiration date g. Insurance Control Yes h. Minimum Ger	rance on of Insurance? Yes e current? s No te? s No Expired s Named KBHI as certificate s No neral Liability Insurance Cove	e holder & verage is \$	\$250,000?	Mark Schmidt Kevin Farris Mitch Buchanan Robb Johnson Mark Oerther J.R. Bone Ken Fister Jim Chandler Vacant				
	 Home Inspection Yes 	tor's Individual Name is und S No	ier "Insure	ed"?					

VII. Other state or local license information Yes